## TRANSFORMING GENERAL PRACTICE SEVEN DAY WORKING OCTOBER 2015

2015 has been an unprecedented year for innovation and activity in NHS Leeds West CCG. All its 37 member practices have been engaged in co-designing, implementing and evaluating an ambitious and transformative enhanced access scheme to improve their patients' access to primary care services.

#### This scheme responds to:

- national drive for seven day working in the NHS
- current capacity of primary care and growing patient demand
- feedback from patients regarding access to general practice services
- local appetite from GP practices to improve services

#### **CURRENTLY WE HAVE...**



practices



covering a **population** of 148,000



providing services

7 DAYS A WEEK



and a further





covering a population of

194,000



delivering extended services

## (7am-7pm or 8am-8pm)



practices



covering a total population of 342,000

# How the scheme was developed

Practices have been able to develop their own approach, and use information from their practice profile/demographics to help inform service delivery, to meet the needs of their patients with the overall aim of:

- improving patient outcomes;
- enhancing patient and staff satisfaction;
- · reducing demand for other services; and
- increasing cost-effectiveness across the local health economy.

Practices are being innovative in service delivery, producing benefits beyond those that might be gained simply by increasing capacity. These include:

- looking at opportunities for further skill mixing (using physiotherapists and pharmacists);
- redesigning their day to do early home visiting, which allows more efficient flow of patients in and out of hospital; and
- participating in modelling demand and capacity as a key part of our scheme.

Delivering most five day schemes began in November 2014 with the majority of the seven day schemes beginning in February 2015.

Criteria for approving the seven day schemes set delivery for populations of a minimum of 35,000. This both safeguarded the smaller practices and also encouraged practices to work together to deliver the schemes. Four hub systems made up of two or more practices emerged between the practices delivering seven day access to general practice.

Since the scheme was introduced, the appetite from member practices to further develop seven day services and neighbourhood collaboration has increased, with more groups of practices wishing to explore further roll-out across the whole Leeds west population. The CCG has committed funding within the life of the scheme to continue the roll out, and so the remaining 22 practices are developing their proposals to support winter resilience.

## Investment

Practices were paid £15 per head of registered population to deliver the five day scheme and £30 per head to deliver the seven day scheme. Funding was provided by the CCG and agreed in the first instance for eighteen months until March 2016.



## **Evaluation and data**

The evaluation strategy was developed during the scheme's early implementation and was designed to evaluate four domains:

- 1. Activity in primary care
- 2. Impact on the wider system and activity
- 3. Patient experience
- 4. Staff experience

Finding a solution to measuring activity in member practices proved to be the greatest challenge in terms of data collection. Practices use either SystmOne or EMIS which added further complexity to the task. However a solution has been found and is now working well.

A detailed independent patient experience survey was undertaken by Healthwatch Leeds as part of the evaluation work. 406 patients were interviewed in 22 practices in May and June 2015. The results were extremely positive as a whole, however it highlighted the need to further market the scheme to raise awareness and also to explore ways to address some patients' concerns around being able to see a preferred GP

A baseline practice staff survey was undertaken in October 2014 and 452 responses were received (45% response rate). The survey is due to be repeated in October 2015.



## **Headlines**

Evaluation data has been analysed for the first six months of the scheme. From November 2014 to May 2015 the following emerging findings have been highlighted (data analysed in comparison to the same period in the previous year):

- Significant progress made in collaboration and joint working between practices, many of the examples unprecedented. These developments are directly attributable to implementing this scheme. This provides a robust platform for future transformation and is one of the scheme's key achievements to date. As a result, new models of care are already beginning to be piloted.
- Early implementation of national direction of travel to provide seven day working giving an opportunity to test the local 'bottom-up' approach before national mandate.
- Approximately 32,000 additional attendances in member practices.
- Potentially significant decrease in GP OOH attendances compared with increases at NHS Leeds North CCG and NHS Leeds South and East CCG equating to a comparative decrease of around 8% (4.3% decrease for Leeds West compared to increases of 8.3% and 3.2% respectively).

- Marginally greater decrease in A&E attendances (selected treatments and investigations<sup>1</sup>) than NHS Leeds North CCG and NHS Leeds South and East CCG equating to around 0.5 - 1% (5.4% decrease for Leeds West compared to decreases of 4.4% and 4.9% respectively).
- Decrease in emergency admissions (selected specialties<sup>2</sup>) compared with increases at NHS Leeds North CCG and NHS Leeds South and East CCG, equating to a comparative decrease of around 4% for LWCCG (1.6% decrease for Leeds West compared to increases of 5.4% and 1% respectively).
- Over 18 months of the scheme this has the potential to generate savings of over £1.8m based on current data with 'flat line' progression. This is expected to increase over time.
- Emerging positive and improving patient experience about the new opening times

### What our patients have told us



#### Mr GG — Burton Croft Surgery

"My practice contacted me by email to let me know about the change to the practice hours, and I feel they're very good at keeping me up to date with any changes that are happening in the practice. I'm very happy with the extended hours that the surgery has introduced"



#### Ms NM – LS6 practice

"As I only visit the practice every six months I didn't know about the extended hours until I rang to make an appointment. The new system was briefly explained to me and I was given an appointment for that day.

"My practice mentioned the hub and spoke model and once they explained to me it how it works and its benefits, I'd be very happy to visit another GP practice as long as it's only walking distance from mine. I work from 8am to 6pm and hopefully it will be much easier to make an appointment, and I'll definitely use evening and weekend appointments."



"Additional hours have made it easier. I work in Harrogate so have to compromise between times and seeing a doctor. It needed to improve." (Ireland Wood & Horsforth **Medical Practice**)



#### Mrs TR - Leigh View Medical Centre

"I've a number of long term conditions and I want to continue to see my own GP as it works better for me, because then I won't need to keep repeating my symptoms to another GP

"The practice explained about hub and spoke and I'd have to say that I don't feel that would work for me with my long term conditions. But if I needed a day to day appointment I'd be happy to take one of the first available appointments and would be happy to travel to a local practice. The model would work very well for my husband who works full time and is 30 miles away from the surgery - evenings and weekends would be really beneficial.

"I'm very happy with both the staff and services at my surgery, the longer hours and access to other local surgeries would make access to appointments easier and stop people going to A&E"



"Good idea. I did not know about the extended hours and good that you have the option to go elsewhere. I prefer to see my own GP as I have a long term condition and feel it is better to see the same GP for continuity of care." (Burton Croft Surgery)

<sup>&</sup>lt;sup>1</sup> Selected treatments and investigations that could have been carried out in general practice

<sup>&</sup>lt;sup>2</sup> Selected specialties where general practice could have affected admission

## NHS Leeds West CCG



**LEEDS** WEST CCG



**BUDGET** 



OUR **POPULATION** Aged over 65



**NUMBER OF MEMBER PRACTICES** 



**POPULATION WE SERVE** 367,390 Registered patients



**OUR POPULATION** and under

LIFE **EXPECTANCY** Years for men

**EXPECTANCY Years** 

NB life expectancy figures for 2010-2012

LIFE **EXPECTANCY** Years for women

IN 2014-2015

Patients had chronic obstructive pulmonary disease (COPD)

Patients had diabetes

92,520

attended A&E

IN A TYPICAL MONTH APPROXIMATELY...

People from our area call NHS 111

Ambulances are called out to addresses in our area

People from our area make use of a minor injury unit

**IN MARCH 2015...** 

23,402
Patients registered as being obese

Patients with asthma

Patients with coronary heart disease

Please note figures were the latest available at the time of publication

#### For further information, please contact:

**Dr Simon Stockill** 

Director of Primary Care and Medical Director

**Kirsty Turner** 

Associate Director of Primary Care

**Dr Christopher Mills** 

Lead GP for Primary Care Transformation

NHS Leeds West CCG, Suite 2-4, WIRA House, West Park Ring Road, Leeds, LS16 6EB

**Tel:** 0113 84 35470

